

U.S. Department of Justice  
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF <b>UNITED STATES OF AMERICA</b>		COURT CASE NUMBER CR No. 04-10129-RCL
DEFENDANT <b>MARK A. MCARDLE</b>		TYPE OF PROCESS <b>PRELIMINARY ORDER OF FORFEITURE</b>
SERVE → AT	Mark McArdle (#25142-038)	U.S. MARSHAL 2007 MAR 21 MASSACHUSETTS SPECIAL AGENT SERIAL # 3123-AH:53
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) Essex County Jail, P.O. Box 807, Middleton, MA 01949-2807	

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Kristina E. Barclay, Assistant U.S. Attorney  
United States Attorney's Office  
John Joseph Moakley United States Courthouse  
1 Courthouse Way, Suite 9200  
Boston, MA 02210

Number of process to be served  
with this Form - 285Number of parties to be served  
in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Preliminary Order of Forfeiture upon the above-referenced individual by certified mail, return receipt requested.

LJT x3283

Signature of Attorney or other Originator requesting service on behalf of : <i>Kristina E. Barclay / LJT</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (617) 748-3100	DATE March 16, 2007
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## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. <u>38</u>	District of Origin No. <u>49</u>	District to Serve	Signature of Authorized USMS Deputy or Clerk <i>Mary E. May</i>	Date <u>3/27/07</u>
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I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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Address (complete only if different than shown above)	Date of Service <u>3/27/07</u>	Time am pm
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Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Deputy	Amount of Refund
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REMARKS:

*Served by certified mail. Return receipt card signed by Paul S. Walczak on 3/27/07*

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse side so that we can return the card to you.
- Attach this card to the back of the mailpiece or on the front if space permits.

## 1. Article Addressed to:

Mark Mcardle  
# 25142-038  
c/o Essex County Jail  
P.O. Box 807  
Middleton, MA 01949-2807

101 MAR 29  
U.S. MARSHAL  
U.S. CONCORD

**COMPLETE THIS SECTION ON DELIVERY**

A. Recipient (Please Print Clearly)

B. Date of Delivery

C. Signature

D. Agent

E. Addressee

F. Yes

G. No

## If YES, enter delivery address below:

3. Service Type

Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

## 4. Restricted Delivery? (Extra Fee)

 Yes

## 2. Article Number (Copy from service label)

7005 1820 0005 8534 1243

## PS Form 3811, July 1999

Domestic Return Receipt

102895-99-M-1789